

TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL

FOR: HEALTH CARE FINANCING ADMINISTRATION

1. TRANSMITTAL NUMBER:

0 2 — 0 1 8

2. STATE:

Vermont

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL
SECURITY ACT (MEDICAID)TO: REGIONAL ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

4/1/02

5. TYPE OF PLAN MATERIAL (Check One):

☐ NEW STATE PLAN☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:

SSA Sec.1902(a)(10)(A)(i)(VI); SSA Sec.1902(a)(10)
(A)(i)(VII); SSA Sec.1902(a)(10)(A)(ii)(IX)

7. FEDERAL BUDGET IMPACT:

a. FFY 2003 \$ 0

b. FFY \$

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Supp. 1 to Att. 2.6-A, page 2 (02-18)

Supp. 1 to Att. 2.6-A, page 2a (02-18)

Supp. 1 to Att. 2.6-A, page 3a (02-18)

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable):

Supp. 1 to Att. 2.6-A, page 2 (92-10)

Supp. 1 to Att. 2.6-A, page 2 (92-10)

Vermont (02-018)

10. SUBJECT OF AMENDMENT:

Update to income eligibility levels for certain groups of children.
(Responding to CMS request that state supply missing pages.)Approved: 12/12/02
Effective: 04/01/02

11. GOVERNOR'S REVIEW (Check One):

- ☐
- GOVERNOR'S OFFICE REPORTED NO COMMENT
-
- ☐
- COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
-
- ☐
- NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

Secretary of Administration
OTHER, AS SPECIFIED: for Governor
Stephen C. Hest

12. SIGNATURE OF STATE AGENCY OFFICIAL:

13. TYPED NAME:

M. Jane Kitchel

14. TITLE:

Secretary, Agency of Human Services

15. DATE SUBMITTED:

9/30/02

16. RETURN TO:

Roxanne Doty
VT Dept. of PATH
103 South Main Street
Waterbury, VT 05671-1201

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED:

September 30, 2002

18. DATE APPROVED:

December 12, 2002

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:

April 1, 2002

20. SIGNATURE OF REGIONAL OFFICIAL:

1. [Signature]

21. TYPED NAME:

Ronald Preston

22. TITLE:

Associate Regional Administrator, DMCH

23. REMARKS:

The effective date was changed from July 1, 2002 to April 1, 2002, per agreement
with Marybeth McCaffrey.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Vermont

INCOME ELIGIBILITY LEVELS

A. MANDATORY CATEGORICALLY NEEDY (Continued)

3. Children under Section 1902(a)(10)(A)(i)(VI) of the Act who have attained age 1 but not attained age 6:

Effective April 1, 1990, based on 133 percent of the official Federal income poverty level.

<u>Family Size</u>	<u>Income Level</u>
<u>1</u>	\$ <u>982</u>
<u>2</u>	\$ <u>1,324</u>
<u>3</u>	\$ <u>1,665</u>
<u>4</u>	\$ <u>2,007</u>
<u>5</u>	\$ <u>2,348</u>
<u>6</u>	\$ <u>2,689</u>
<u>7</u>	\$ <u>3,031</u>
<u>8</u>	\$ <u>3,372</u>
<u>9</u>	\$ <u>3,713</u>
<u>10</u>	\$ <u>4,055</u>
Each Added Member	\$ <u>342</u>

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Vermont

INCOME ELIGIBILITY LEVELS (Continued)

A. MANDATORY CATEGORICALLY NEEDY GROUPS WITH INCOMES
RELATED TO FEDERAL POVERTY LEVEL

4. Children Between Ages 6 and 19

The levels for determining income eligibility for children born after September 30, 1983, (or, at the option of a State, after any earlier date), who have attained 6 years of age but have not attained 19 years of age under the provisions of §1902(a)(10)(A)(i)(VII) of the Act are as follows:

Based on 100 percent (no more than 100 percent) of the official Federal income poverty line:

<u>Family Size</u>	<u>Income Level</u>
<u>1</u>	\$ <u>739</u>
<u>2</u>	\$ <u>995</u>
<u>3</u>	\$ <u>1,252</u>
<u>4</u>	\$ <u>1,509</u>
<u>5</u>	\$ <u>1,765</u>
<u>6</u>	\$ <u>2,022</u>
<u>7</u>	\$ <u>2,279</u>
<u>8</u>	\$ <u>2,535</u>
<u>9</u>	\$ <u>2,792</u>
<u>10</u>	\$ <u>3,049</u>
Each Added Member	\$ <u>257</u>

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Vermont

INCOME ELIGIBILITY LEVELS (Continued)

B. OPTIONAL CATEGORICALLY NEEDY GROUPS WITH INCOMES
RELATED TO FEDERAL POVERTY LEVEL

2. Children under Section 1902(a)(10)(A)(ii)(IX) and Section 1902(l)(1)(C) of
the Act who have attained age 1 but have not attained age 6:

Effective 7/1/90, based on 133 percent of the official Federal income poverty
level:

<u>Family Size</u>	<u>Income Level</u>
<u>1</u>	\$ <u>982</u>
<u>2</u>	\$ <u>1,324</u>
<u>3</u>	\$ <u>1,665</u>
<u>4</u>	\$ <u>2,007</u>
<u>5</u>	\$ <u>2,348</u>
<u>6</u>	\$ <u>2,689</u>
<u>7</u>	\$ <u>3,031</u>
<u>8</u>	\$ <u>3,372</u>
<u>9</u>	\$ <u>3,713</u>
<u>10</u>	\$ <u>4,055</u>
Each Added Member	\$ <u>342</u>

TN No. 02-18
Supersedes
TN No. none

Approval Date 12/12/02

Effective Date 4/1/02

HCFA ID: 7985E